

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1020)

Complete if Known	
Application Number	10/809,072
Filing Date	March 25, 2004
First Named Inventor	Steven J. Bullied et.al
Examiner Name	Kuang Y. Lin
Art Unit	1725
Attorney Docket No.	EH-11132

METHOD OF PAYMENT (check all that apply)
 Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 21-0279 Deposit Account Name: Pratt & Whitney

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

 Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity	
Fee (\$)	Fee (\$)
50	25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200	100
-----	-----

Multiple dependent claims

360	180
-----	-----

Total Claims

Extra Claims	Fee (\$)	Fee Paid (\$)
0 - 20 or HP = 0	0	0

HP = highest number of total claims paid for, if greater than 20

Multiple Dependent Claims

Fee (\$)	Fee Paid (\$)
0	0

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
0 - 3 or HP = 0	0	200	0

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

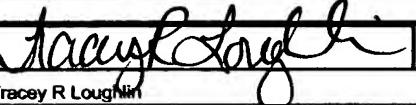
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	- 100 = _____ / 50 = _____ (round up to a whole number)	_____	_____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: 3 month extension of time Fees Paid (\$) 1,020.00**SUBMITTED BY**

Signature		Registration No. 51,969 (Attorney/Agent)	Telephone 860-565-6127
Name (Print/Type)	Tracey R. Loughlin		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) EH-11132																			
Application Number 10/809,072		Filed March 25, 2004																			
For SINGLE CRYSTAL INVESTMENT CAST COMPONENTS AND METHODS OF MAKING																					
Art Unit 1725		Examiner Kuang Y. Lin																			
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table> <thead> <tr> <th></th> <th>Fee</th> <th>Small Entity Fee</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$110</td> <td>\$55</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$420</td> <td>\$210</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$950</td> <td>\$475</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$1480</td> <td>\$740</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$2010</td> <td>\$1005</td> </tr> </tbody> </table> <p> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>21-0279</u>. I have enclosed a duplicate copy of this sheet. </p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>					Fee	Small Entity Fee	<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	\$55	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$420	\$210	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$950	\$475	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1480	\$740	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2010	\$1005
	Fee	Small Entity Fee																			
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	\$55																			
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$420	\$210																			
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$950	\$475																			
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1480	\$740																			
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2010	\$1005																			
<p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>51,969</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u> </u></p>																					
 Signature		<u>11/23/05</u> Date																			
<u>Tracey R. Loughlin</u> Typed or printed name		<u>860-565-4321</u> Telephone Number																			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.136(e). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

11/29/2005 WABD1R1 00000026 210279 10809072

01 FC:1253 1020.00 DA